Admissions in MilBS Course from the discretionary Quota of the Health Minister

69. SHRI S. MUTHU MANI; Will ihe Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) what is the total number of beats for admissions in M.B.B.S. course all over the couniry the Minister of Health has goj under his discretionary quota;

(b) how many seals for admission in M.B.B.S. course have been released by the Minister of Health from his discretional y quota for the year 1994 and what was the criteria fixed/adopted for (be selection of seats from the Hon'ble Health Minister's discretionary quota;

(c) the number of students from foreign countries who were benefited from the said quota through the Minister of External Affairs, with details thereof; and.

(d) whether it is a fact that the Hon 'ble Health Minister has given admissions to foreign students himself directly from his discretionary quota?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI B. SHANKARANAND): (a) There is no discretionary quota as such for admission to M.B.B.S. course with the Minister of Health & Family Welfare.

1 ,o (d) Do not arise.

Expenditure on Health

70. SHRI S. MUTHU MANI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that the total expenditure of Government on Health is 1.5 per cent of the GDP

(b) whether the World Health Organisation (WHO) recommendej for 5 per cent of the GDP;

(c) whether Government took any action to implement the WHO's recommendation to increase the expenditure slth; and

(d) if so, what are the details thereof?

HIE MINISTER OH HEALTH AND FAMILY WELFARE (SHRI B. SHANLAKANAND) (a) to (d) According to Human Development Report. 1994 of ihe United Nation Development Pro-gramme, the percentage of public expenditure on health in India is 1.3 per-ceni of (he Gross Domestic Produce (199(1). However the total expenditure oil health tpublie and private) as per that Report is 6 per cent of GDP (1990). At the 34th World Health Assembly in)>8I. 12 global indicators had been adorned to evaluate ihe strategies for ,Hcalih for All' by the year 2000AD. One of these indicators i^ the humbers of countries in which at least 5 percent of Cross National Product (GNP) is spent on Health. Health js assigned a pro-rata shares of the total public sector o>.!t*ay keeping in mind the priorities. In order 10 improve the allocation for Health, Government has inter-alia s°ught external assistance to support the National and State Programme and projects in Health and Family Welfare sectors'.

Incidents of Malaria in trtt.nl districts Of Oris.ya

71. SHRI RAHASDIHARI DARIK: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government are aware of the increasing death toll on account of Malaria in undivided Koraput, Keonjhar and several other tribal populated dis tricts in Orissa;

(b) if so, the number of people died in those districts; and

(c) the details of the steps proposed to be taken for the people suffering from Malria in those districts to check any further death?

THE MINISTER OF HEALTH AND FAMTLY WELFARE (SHRI B. SHAN-

KARANAND): (a) and (b) Yes, Sir. The number of people who are reported lo have die, during 1993 and 1994, districiwjse, is as under; —

	1993	1994 (upto Oct.)
Cuttack	1	2
Ganjam	1	..
Dhankanal	2	5
Ke njhar	28	25
Keraput		11
Kalahandi	5	..
Mayubhanj	8	4
Phulbani	1	1
Sambalpur	1	4

(V) The steps taken include:

Active surveillance

case detection and prompt treatment

residual inseeticidal spray

community participation and health education

Bio-environmental measures

A proposal seeking World Bank assistance for intensification of malaria control activities in the predominantly tribal populated districts of seven States including Orissa is also under formulation.

कैंसर, यक्ष्मा तथा "एड्स" के रोगी

72. **श्री शंकर दयाल सिंह:** क्या **स्वास्थ्य और परिवार कल्याण मंत्री** यह बताने की कृपा करेंगे कि :

(क) भारत में कैंसर, यक्ष्मा तथा "एड्स" के रोगियों की संख्या अनुमानत: कितनी है ;

(ख) इन रोगों के उपचार के लिए देश के किन-किन हिस्सों में कौन-कौन से संस्थान हैं;

(ग) क्या इन रोगों की रोकथाम हेतु भारत को विश्व स्वास्थ्य संगठन से भी कोई सहायता मिलती है; और

(घ) यदि हां, तो उसका ब्यौरा क्या है ?

स्वास्थ्य और परिवार कल्याण मंत्री (श्री बी. शंकरानन्द) : (क) अनुमान है कि भारत मे लगभग 15 से 20 लाख कैंसर रोगी और लगभग 1.2 से 1.4 करोड़ क्षय रोगी हैं । 30 नवम्बर, 1994 तक 905 एड्स रोगी सूचित किए गए हैं ।

(ख) कैंसर रोगियों के उपचार के लिए विकिरण चिकित्सा सुविधाएं 124 सस्थाओं में उपलब्ध हैं और सूची विवरण–I **(नीचे देखिए)** के रूप में संलग्न है । राष्ट्रीय क्षयरोग नियंत्रण कार्यक्रम को जिला क्षयरोग केन्द्रों के जरिए कार्यान्वित किया जाता है । जिला क्षयरोग केन्द्रों और मान्यताप्राप्त स्वैच्छक संगठनों आदि के बारे में सूचना विवरण II **(नीचे देखिए)** पर संलग्न है जहां तक एड्स का संबंध है अभी तक इसका कोई इलाज नहीं है । तथापि एड्स रोगियों को बीच-बीच में होने वाले संक्रमणों का इलाज सार्वजनिक क्षेत्र के सभी अस्पतालों में किया जा रहा है ।

(ग) और (घ) विश्व स्वास्थ्य संगठन इस प्रयोजन के लिए तकनीकी और वित्तीय सहायता प्रदान कर रहा है ।